

<b>SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS</b>				<b>1. Requisition Number</b> SEE SCHEDULE		<b>Page</b> 1 <b>Of</b> 3	
<b>Offeror To Complete Block 12, 17, 23, 24, &amp; 30</b>							
<b>2. Contract No.</b> DAAE07-01-D-T073		<b>3. Award/Effective Date</b> 2004JAN12		<b>4. Order Number</b> 0008		<b>5. Solicitation Number</b>	
<b>6. Solicitation Issue Date</b>							
<b>7. For Solicitation Information Call:</b>		<b>A. Name</b> INGRID E. CUFFARO		<b>B. Telephone Number (No Collect Calls)</b> (586) 574-4288		<b>8. Offer Due Date/Local Time</b>	
<b>9. Issued By</b> TACOM WARREN BLDG 231 AMSTA-LC-CJTZ WARREN, MICHIGAN 48397-5000  HTTP://CONTRACTING.TACOM.ARMY.MIL  <b>e-mail:</b> CUFFARO1@TACOM.ARMY.MIL		<b>10. This Acquisition Is</b> <input checked="" type="checkbox"/> Unrestricted <input type="checkbox"/> Set Aside: % For <input type="checkbox"/> Small Business <input type="checkbox"/> Small Disadv Business <input type="checkbox"/> 8(A) <b>SIC:</b> <b>Size Standard:</b>		<b>11. Delivery For FOB Destination Unless Block Is Marked</b>		<b>12. Discount Terms</b>	
				<input type="checkbox"/> See Schedule			
				<input checked="" type="checkbox"/> <b>13a. This Contract Is A Rated Order Under DPAS (18 CFR 700)</b>			
				<b>13b. Rating</b> DOA4			
				<b>14. Method Of Solicitation</b>			
<input type="checkbox"/> RFQ		<input type="checkbox"/> IFB		<input type="checkbox"/> RFP			
<b>15. Deliver To</b> XR W390 RED RIVER MUNITIONS CTR HIGHWAY 82 WEST CL V TPF GATE 44 BLDG 184 TEXARKANA TX 75507-5000		<b>Code</b> W45G19		<b>16. Administered By</b> DCMA ATLANTA 805 WALKER ST, SUITE 1 MARIETTA, GA 30060-2789		<b>Code</b> S1103A	
<b>Telephone No.</b>							
<b>17. Contractor/Offeror</b> <b>Code</b> 12195 <b>Facility</b>				<b>18a. Payment Will Be Made By</b> <b>Code</b> HQ0338			
MICHELIN NORTH AMERICA, INC. ONE PARKWAY SOUTH GREENVILLE, SC. 29602				DFAS-COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P.O. BOX 182264 COLUMBUS, OH 43218-2264			
<b>Telephone No.</b>							
<input type="checkbox"/> <b>17b. Check If Remittance Is Different And Put Such Address In Offer</b>		<b>18b. Submit Invoices To Address Shown In Block 18a Unless Block Below Is Checked</b> <input type="checkbox"/> See Addendum					
<b>19. Item No.</b>	<b>20. Schedule Of Supplies/Services</b>			<b>21. Quantity</b>	<b>22. Unit</b>	<b>23. Unit Price</b>	<b>24. Amount</b>
	SEE SCHEDULE						
(Attach Additional Sheets As Necessary)							
<b>25. Accounting And Appropriation Data</b> ACRN: AA 97 X4930AC9D 6D 26KB S20113 W56HZV						<b>26. Total Award Amount (For Govt. Use Only)</b> \$14,065.00	
<input type="checkbox"/> <b>27a. Solicitation Incorporates By Reference FAR 52.212-1, 52.212-4. FAR 52.212-3 And 52.212-5 Are Attached.</b>						<input type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.	
<input checked="" type="checkbox"/> <b>27b. Contract/Purchase Order Incorporates By Reference FAR 52.212-4. FAR 52.212-5 Is Attached. Addenda</b>						<input checked="" type="checkbox"/> Are <input type="checkbox"/> Are Not Attached.	
<b>28. Contractor Is Required To Sign This Document And Return _____ Copies</b> <input type="checkbox"/> To Issuing Office. Contractor Agrees To Furnish And Deliver All Items Set Forth Or Otherwise Identified Above And On Any Additional Sheets Subject To The Terms And Conditions Specified Herein.				<b>29. Award Of Contract: Reference _____ Offer</b> <input type="checkbox"/> Dated _____. Your Offer On Solicitation (Block 5) Including Any Additions Or Changes Which Are Set Forth Herein Is Accepted As To Items:			
<b>30a. Signature Of Offeror/Contractor</b>				<b>31a. United States Of America (Signature Of Contracting Officer)</b>			
<b>30b. Name And Title Of Signer (Type Or Print)</b>		<b>30c. Date Signed</b>		<b>31b. Name Of Contracting Officer (Type Or Print)</b> DAVID EPSKAMP /SIGNED/ EPSKAMPD@TACOM.ARMY.MIL (586) 574-4295		<b>31c. Date Signed</b>	
<b>32a. Quantity In Column 21 Has Been</b> <input type="checkbox"/> Received <input type="checkbox"/> Inspected <input type="checkbox"/> Accepted And Conforms To The Contract Except As Noted				<b>33. Ship Number</b>		<b>34. Voucher Number</b>	
				<input type="checkbox"/> Partial <input type="checkbox"/> Final			
<b>32b. Signature Of Authorized Government Representative</b>				<b>32c. Date</b>		<b>35. Amount Verified Correct For</b>	
<b>32b. Signature Of Authorized Government Representative</b>				<b>32c. Date</b>		<b>37. Check Number</b>	
<b>41a. I Certify This Account Is Correct And Proper For Payment</b>				<b>42a. Received By (Print)</b>			
<b>41b. Signature And Title Of Certifying Officer</b>				<b>41c. Date</b>		<b>42b. Received At (Location)</b>	
				<b>42c. Date Recd (YYMMDD)</b>		<b>42d. Total Containers</b>	

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Standard Form 1449 (10-95)

Prescribed By GSA-FAR (4.8 CFR) 53.212

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**Name of Offeror or Contractor:** MICHELIN NORTH AMERICA, INC.

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	SUPPLIES OR SERVICES AND PRICES/COSTS				
0001	NSN: 2610-00-163-0418 FSCM: 81348 PART NR: X/GP3/TYRB/CLA/T/8.25-20/F SECURITY CLASS: Unclassified				
0001AA	<u>PRODUCTION QUANTITY</u>  NOUN: TIRE,PNEUMATIC,VEHI PRON: EH492469EH      PRON AMD: 02      ACRN: AA AMS CD: 060011  <u>Packaging and Marking</u> PACKAGING/PACKING/SPECIFICATIONS: MIL-T-4 LEVEL PRESERVATION: Commercial LEVEL PACKING: Commercial  <u>Inspection and Acceptance</u> INSPECTION: Origin      ACCEPTANCE: Origin  <u>Deliveries or Performance</u> DOC                          SUPPL <u>REL CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG CD</u> <u>MARK FOR</u> <u>TP CD</u> 001 W56HZV33300081 W45G19 J                          2 <u>DEL REL CD</u> <u>QUANTITY</u> <u>DEL DATE</u> 001                          97                          24-MAR-2004  FOB POINT: Destination  SHIP TO: <u>PARCEL POST ADDRESS</u> (W45G19)    XR W390 RED RIVER MUNITIONS CTR HIGHWAY 82 WEST CL V TPF GATE 44 BLDG 184 TEXARKANA                          TX 75507-5000  <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE07-01-D-T073/0008	97	EA	\$ 145.00000	\$ 14,065.00

Name of Offeror or Contractor: MICHELIN NORTH AMERICA, INC.

CONTRACT ADMINISTRATION DATA

PRON/										JOB		ACCOUNTING		OBLIGATED	
LINE	AMS	CD/	OBLG							ORDER		STATION			
<u>ITEM</u>	<u>MIPR</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>						<u>NUMBER</u>		<u>STATION</u>		<u>AMOUNT</u>	
0001AA	EH492469EH	AA	2	97	X4930AC9D	6D	26KB	S20113				W56HZV	\$	14,065.00	
	060011														
													TOTAL	\$	14,065.00
SERVICE										ACCOUNTING		OBLIGATED			
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>							<u>STATION</u>		<u>STATION</u>		<u>AMOUNT</u>	
Army		AA	97	X4930AC9D	6D	26KB	S20113			W56HZV	\$	14,065.00			
													TOTAL	\$	14,065.00